

REPORT TO THE
TWENTY-FIRST LEGISLATURE
STATE OF HAWAI`I
2002

PURSUANT TO ACT 259, SECTION 27, SESSION LAWS HAWAI`I 2001
REQUIRING A REPORT BY THE DEPARTMENT OF HEALTH
ON THE FUNDS EXPENDED FOR HEALTH PROMOTION
AND DISEASE PREVENTION PROGRAMS
FROM THE TOBACCO SETTLEMENT FUND, INCLUDING EXPENDITURE
AND ALLOCATION OF FUNDS FOR THE STATE CHILDREN'S HEALTH INSURANCE
PROGRAM

PREPARED BY:
DEPARTMENT OF HEALTH
STATE OF HAWAI`I
MARCH 2002

Tobacco Settlement Special Fund
Department of Health, FY 01-02
Expenditure Status Report Narrative

This report is submitted in response to Act 259, Section 27, Session Laws Hawaii 2001, stating that the health resources administration (HTH 595), shall prepare and submit a detailed status report of the funds expended by the Department of Health for health promotion and disease prevention programs, including but not limited to, maternal child health and child development program, promotion of healthy lifestyles, and prevention oriented public health programs, from the tobacco settlement fund, including all expenditures, and any allocation of funds for the state children's health insurance program; provided that the report shall be submitted on the expected and actual revenue, national total and Hawaii's share, from the master settlement agreement; and provided further that the report shall be submitted to the legislature no later than twenty days prior to the convening of the 2002 and 2003 regular sessions.

The attached spreadsheet delineating the expenditures of the Department of Health's allocation from the tobacco settlement special fund correlates with The Healthy Hawaii Initiative's printed Report to the Legislature, distributed earlier this session. Where specifically applicable, the appropriate page number of the report is referenced in this narrative. This narrative, the spreadsheet, and the published report work together to provide complete information.

In Act 304, SLH 1999, the legislature mandated the Department of Health (DOH) to expend at least 25% of the tobacco settlement money for health promotion and disease prevention programs . . . promotion of healthy lifestyles (including fitness, nutrition and tobacco control), and prevention oriented public health programs. As a result, the DOH created "The Healthy Hawaii Initiative." (HHI). The Initiative is a major, statewide effort to encourage healthy lifestyles and the environments to support them with an emphasis on the healthy development of children and adolescents in relation to the three critical shared risk factors of poor nutrition, lack of physical activity, and tobacco use that contribute significantly to the burden of chronic disease.

There are four major components of the HHI are: school based programs; community programs; public and professional education; and program evaluation.

School-Based Health Initiatives (pp.3-4) – a partnership with the Department of Education to implement the health education and physical education content and performance standards in public schools state-wide, K-12, and funding of 16 schools to pilot coordinated school health systems. Total funding = \$5.5M: \$1.85M in FY 1999-2000; \$1.85M in FY 2000-2001; \$0 in FY 2001-2002; \$1.85M in FY 2002-2003.

Youth Risk Behavioral Survey – implementation, analysis and dissemination of the YRBS, the primary data source available to track trends in health risks and behaviors of school-aged children in Hawaii. \$130,000

Community-Based Initiatives (pp.4-5)

Targeted Interventions – up to \$750,000 for competitively determined qualified applicants to develop and implement interventions for health improvement in one or more areas of reducing tobacco use, improving nutrition, and/or increasing physical

activity. Bid awards range from \$100K to \$150K. Awardees included City and County of Honolulu Department of Parks and Recreation; City and County of Honolulu Department of Transportation Services; Friends for Fitness Coalition, West Hawaii; University of Hawaii Department of Kinesiology and Leisure Science; Ke Kula 'o Samuel M. Kamakau Laboratory Public Charter School.

WIC Farmers Market Grant Match - \$25,000 match commitment to enable the WIC Program to apply for Federal funds available from the USDA. The WIC Farmers' Market Nutrition Act of 1992 authorizes grants to state WIC programs to provide resources to women, infants and children who are nutritionally at risk in the form of fresh nutritious unprepared foods (such as fruits and vegetables) from farmers' markets and to expand the awareness and use of farmers' markets. States must provide 30% match.

Grass Roots Communities (pp. 4, 11-12) – funding of 26 communities statewide to organize around health issues, develop partnerships, survey perceived health concerns, select priorities and develop action plans. Additional funding available to communities and their partners for action plan implementation if it addresses some form of tobacco prevention and control, increased physical activity, or improving nutrition. Total funding available to each community = \$24,000. First round of funding in FY 2000-2001 = \$624,000. Second round of funding at the same levels anticipated in FY 2001-2002.

REAL Program – Youth Movement Against Tobacco Use, lead agency is the Community-Based Health Research Group at the Cancer Research Center of Hawaii. The program has been designed by Hawaii's youth with support from adult advisors, made possible by an American Legacy Foundation Grant (ALF). HHI provided match funds for the ALF planning grant in FY 2000-2001. (\$81,600) In the current FY 2001-2002, HHI is providing \$319,670 for program implementation, and the Tobacco Prevention & Control Trust Fund is providing \$150,000. Program goals as determined by the teens are to educate, protect, and empower youth; support and create strategies to reduce tobacco use; expose the industry's manipulative tactics and its effects; and create a statewide movement, collaborating across agencies and islands.

Technical Assistance and Training - \$208,000. Working with the University of Kansas Center for Research Work Group on Health Promotion and Community Development to build capacity for documenting actions and accomplishments of HHI funded communities and schools. The Community Tool Box Online Support and Documentation System is exclusive to the University of Kansas and has been developed, refined and evaluated over a 20-year period. With systematic documentation of multiple communities using a common measurement system, we can better see and understand promising programs and policies, and useful resources that enhance community capacity to address health issues. Training is being provided to HHI staff and to funded communities and schools using a "train the trainer" approach to create sustainability. Competent technical assistance is a critical complement to training to support community efforts, as they are constantly looking for advice, information and expert assistance on the "hows" of addressing health issues.

Community Health Division Projects and Support - \$559,532. As the Physical Activity, Nutrition, and Tobacco Education programs are housed in the Community Health Division, this money supports activities and projects such as the statewide

Physical Activity and Nutrition Coalitions, chronic disease epidemiology, and community development.

POS Contract Support for Community Initiatives - \$328,436. Purchase of services – chronic disease epidemiologist, two community outreach specialists, public health informatics specialist, and clerk. Outside professional assessment indicated the need for chronic disease epidemiology capacity to help rebuild and carryout critical core functions of public health assessment, policy development and assurance. Epidemiology is the core science of public health, and as such, it provides the objective basis for disease prevention and health promotion. In order to build and promote sustainable public health systems, infrastructure and capacity that reflect community-based priorities and needs, a responsible and responsive health department must focus effort at the public health systems level; at the community level (neighborhood, town, city); and, at the state policy level. The community outreach workers support the HHI community initiatives, working hands-on in community helping to engage them in diverse partnerships to mobilize action to address community health issues.

DHRD Partnership – Wellness Program - \$100,000. Partnership with the Department of Human Resources Development to research, develop and implement a wellness program for state employees.

Public Awareness/Education (p. 6)

Start.Living.Healthy Campaign – \$800,000. Contract awarded to Starr Seigle Communications to develop and launch an ongoing multi-media social marketing, advertising and public relations effort focusing on options for healthier eating, increasing physical activity, and tobacco use prevention. By delivering clear, practical messages about adopting healthier lifestyles and making healthier choices, the campaign will provide creative and consistent health promotion information and opportunities to help people realize that simple changes in habits can bring big health rewards.

Exercise Honolulu - \$125,000. Partnership with City & County of Honolulu, Honolulu County Medical Society with additional sponsorship by Meadow Gold Dairies for a community service project promoting good nutrition and encouraging inactive people to take a walk. Using a “Take the First Step” approach, Exercise Honolulu is composed of two main events at Ala Moana Park that include health fairs and a series of easy walks, as well as Sunday weekly walks in community parks around Oahu.

Exercise Hawaii - \$250,000. Expansion of Exercise Honolulu statewide through additional partnerships with Maui, Hawaii and Kauai counties, local medical societies, and the Farm Bureau.

Tobacco Counter-Marketing - \$802,000. Counter-marketing is part of “best practices” for tobacco prevention and control, and this funding is complementing the DOH’s CDC funding from the Office of Smoking and Health. Such activities can promote smoking cessation and decrease the likelihood of initiation. Counter-marketing messages can have a powerful influence on public support for tobacco control intervention and set a supportive climate for school and community efforts. Counter-marketing also attempts to counter pro-tobacco influences and increase pro-health messages through a wide range of efforts, including paid television, radio,

mall, stadium and print counter-advertising; media advocacy, press releases, local events and health promotion activities. This stream of funding is targeted at youth.

Professional Education Campaign – (p. 6) - \$530,000. Funding through a competitive bid process to develop a comprehensive, multi-track, multi-disciplinary professional education program with the following objectives: increase smoking cessation rates, better nutrition and weight loss, and physical fitness by changing health care professional practice patterns to incorporate primary prevention and counseling consistent with best practices approaches; provide health care professionals and paraprofessionals with culturally appropriate tools to encourage healthy lifestyle changes; coordinate with the public awareness campaign to ensure consistent health promotion messages; identify and incorporate educational curricula into health professional school training programs to promote longevity of coordinated health education messages.

Hawaii Outcomes Institute – (pp.7-8) – Partnership with the University of Hawaii creating a neutral, credible data warehouse to process, integrate, analyze and share information with communities, agencies, potential funders, legislators and other stakeholders to support informed decision making about the health and welfare of Hawaii's people. The Outcomes Institute also helps develop assessment tools and evaluation programs to measure the success and effects of HHI. Designed as well to help develop professional capacity in assessment, evaluation and outcomes applications, the Institute has the potential to establish Hawaii as an international center for public health research on community and systems change relating to chronic disease prevention. This supports the expansion of our state's role as a center for health for the Asia-Pacific region. Total funding = \$5.2M: \$3.2M in FY 2000-2001; \$0 in FY 2001-2002; \$2M allotted in FY 2002-2003.

Social Epidemiology Project/Epidemiological Research Related to Public Health – (p.7) – collaboration with the University of Hawaii John A. Burns School of Medicine's Department of Public Health Sciences and Epidemiology to coordinate and support the development and implementation of epidemiological research related to planning and evaluating public health interventions to promote healthy lifestyles among the general population of Hawaii. Objectives include designing behavioral interventions to reduce risk factors of chronic diseases, calculating standardized and adjusted rates, and conducting survey research. The project supports three epidemiologists and biostatisticians and the above activities. This project, in conjunction with the Hawaii Outcomes Institute, is also dedicated to helping rebuild the School of Public Health at the University of Hawaii. Total funding = \$1.26M: \$420,000 in FY 1999-2000; \$420,000 in FY 2000-2001; \$0 in FY 2001-2002; \$420,000 in FY 2002-2003.

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Enforcement – Tobacco Retailer Inspections – \$300,000. Funding of the tobacco retailer inspections to monitor tobacco sales to minors.

Healthy Start Expansion – Funding to pilot a new component of the Healthy Start program entitled Healthy Start Plus. As a prevention-oriented program working with high-risk families, Healthy Start Plus addresses a population who have substance use and mental health issues, who traditionally are individuals who have issues with tobacco addiction, poor nutrition, and limited physical activity. Total funding = \$3.1M: \$89K in FY 2000-2001, \$1.34M in FY 2001-2002, \$1.66M in FY 2002-2003.

Tobacco Prevention and Control Trust Fund Support - \$1,000,000. HHI coordination with and support of Trust Fund grantmaking activities in tobacco prevention and control.

Attorney General's Master Settlement Agreement Enforcement Fund - \$87,500. Mandated by Act 270, SLH 2001, this represents HHI's share of the \$350,000 total.

Tobacco Settlement Fund Project Administration and Management - \$686,081 funds 14 positions (salary + fringe) across The Healthy Hawaii Initiative, Physical Activity Section, Nutrition Section, Maternal Child Health, and the overall Tobacco Settlement Fund Manager.

Tobacco Settlement Special Fund Project Support - \$416,661 funds support for all projects across the tobacco settlement special fund, including community partnerships and POS contracts.

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Department of Human Services – Children's Health Insurance Programs

DHS is entitled to up to 10% of total tobacco settlement revenues for children's health insurance programs. Their allocation for FY 2001-2002 is \$5,003,000. The Department of Health has received only a first quarter expenditure report from DHS without details on the three children's health insurance programs' structures, benefits or activities.

Tobacco Settlement Special Fund
Department of Health, FY 01-02
Expenditure Status Report

Program	FY 02 Allocated Amount	Expenditure + Encumbrance For the Six Months 12/31/01	In Process	To be Encumbered	Totals
The Healthy Hawaii Initiative					
School-Based Health Initiatives	0 (1)			0	0
Youth Risk Behavioral Survey	130,000			130,000	130,000
	130,000			130,000	130,000
Community-Based Initiatives					
Targeted Interventions	750,000		750,000	0	750,000
WIC Farmers Market Grant Match	25,000		25,000	0	25,000
Grass Roots Communities	624,000		624,000	0	624,000
REAL Program	319,670		319,670	0	319,670
Technical Assistance & Training	208,000		208,000	0	208,000
Community Health Division Projects & Support	559,532	167,287		392,245	559,532
POS Contract Support for Community Initiatives	328,436	68,437		259,999	328,436
DHRD Partnership - Wellness Program	100,000			100,000	100,000
	2,914,638	235,724	1,926,670	752,244	2,914,638
Public Awareness/Education					
Start.Living. Healthy Campaign	800,000		800,000	0	800,000
Exercise Honolulu	125,000		125,000	0	125,000
Exercise Hawaii	250,000		250,000	0	250,000
Tobacco Counter Marketing	802,000	412,732		389,268	802,000
Others	190,000	181,336		8,664	190,000
	2,167,000	594,068	1,175,000	397,932	2,167,000
Professional Education Campaign	530,000		530,000	0	530,000
Hawaii Outcomes Institute	0 (1)			0	0
Epidemiology Project with UH	0 (1)			0	0
Enforcement - Tobacco Retailer Inspections	300,000	289,611		10,389	300,000
Healthy Start Expansion	1,350,000	1,344,588		5,412	1,350,000
Tobacco Prevention Trust Fund Support	1,000,000	1,000,000		0	1,000,000
Attorney General's Enforcement Fund	87,500	87,500		0	87,500
Tobacco Settlement Fund Project Administration:					
Staffing + Fringe	686,081	314,631		371,450	686,081
TSSF Project Support	416,661	125,504		291,157	416,661
Totals	9,581,880	3,991,626	3,631,670	1,958,584	9,581,880
Department of Human Services (Up to 10% of total revenues)					
Allocation for FY 2001-2002	5,003,000				
Expenditure through 9/30/01					
SCHIP	372,976				
CFA-Children	59,742				
Immigrant Children	245,418				
TOTAL	678,136				
Note: (1) Major HHI Component; multi-year program. No obligation in FY 02. See Expenditure Status Report Narrative.					

		Tobacco Settlement Projected and Actual Payments							
FY	Estimated National Payment	Date Due	Projected Hawaii Payment	Recv'd	Actual Hawaii Payment				
2000	2,400,000,000		14,444,760	12/14/99	14,860,228				
	2,472,000,000	1/10/00	14,878,103	1/3/00	12,943,949				
	4,500,000,000	4/15/00	23,711,976	4/17/00	20,538,989				
				4/18/00	270,478				
				4/28/00	1,576				
Sub-total					48,615,220				
2001				8/30/00	1,488				
	2,546,160,000	1/10/01	15,324,446	12/29/00	11,655,975				
				1/10/01	3,584				
	5,000,000,000	4/15/01	26,346,640	4/16/01	24,144,116				
				4/25/01	297,617				
				6/14/01	28,601				
Sub-total					36,131,381				
2002	2,622,544,800	1/10/02	15,784,179	12/31/01	11,699,831				
				1/10/02	341,380				
	6,500,000,000	4/15/02	34,250,632						
2003	2,701,221,144	1/10/03	16,257,705						
	6,500,000,000	4/15/03	34,250,632						
Total Tobacco Settlement Payments Received by Hawaii					96,787,812				